

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO. _____		FILING DATE _____						
						APPLICANT(S) _____								
CLAIMS														
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.			
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TOTAL IND.	2													
TOTAL DEP.	14													
TOTAL CLAIMS	16													
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS														